

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JEB 2016, INC.**

**A. Full Name (Last, First, Middle Initial)**

**MR. PETR THORSON**

Mailing Address 15 RIDGEBROOK ROAD

City	State	Zip Code
GREENWICH	CT	06830-4747

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**MERRILL LYNCH**

Occupation  
**INVESTMENT ADVISOR**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17.110345**

Date of Receipt

**06 / 19 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**B. Full Name (Last, First, Middle Initial)**

**MRS. SARAH THORSON**

Mailing Address 15 RIDGEBROOK ROAD

City	State	Zip Code
GREENWICH	CT	06830-4747

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOMEMAKER**

Occupation  
**HOMEMAKER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17.110343**

Date of Receipt

**06 / 19 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**C. Full Name (Last, First, Middle Initial)**

**MS. DEBRA TIBERIO**

Mailing Address 13478 66TH STREET NORTH

City	State	Zip Code
WEST PALM BEACH	FL	33412-1927

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**PALM BEACH GRADING, INC.**

Occupation  
**CHIEF FINANCIAL OFFICER**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17.122973**

Date of Receipt

**06 / 30 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**Subtotal Of Receipts This Page (optional)**.....

8100.00

**Total This Period (last page this line number only)**.....